

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>12318</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>Ray</u> <u>Ortiz</u> P.O. Box, Bldg., Room No., if any Street <u>1188 Franklin Street, 4th floor</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94109</u>	4. Name, file number, and address of labor organization. Name <u>International Longshore and Warehouse Union</u> Labor Organization File Number <u>000-202</u> P.O. Box, Building and Room Number, if any Street <u>1188 Franklin Street, 4th Floor</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94109</u>
5. Position in labor organization. <u>Coast Committeeman</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>American President Lines</u> Trade Name, if any: <u>APL</u> P.O. Box, Bldg., Room No., if any Street <u>1111 Broadway</u> City <u>Oakland</u> State <u>California</u> ZIP Code + 4 <u>94607-5500</u>	7.a. Nature of Interest, Transaction, or Income. <u>1/15/2004 dinner (\$85 est.)</u> 7.b. Amount. <u>\$85</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

8/15/2005

Date

415-775-0533

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.**11.b. Approximate dollar value of such dealing.****12.a. Nature of interest held or income received.****12.b. Amount.**

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Riviera Resort Hotel

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1600 N. Indian Canyon Drive

City Palm Springs

State California ZIP Code + 4 92262-4602

14.a. Nature of payment.

9/25/2004 wine and cheese basket (\$52 est)

13.b. Is the Business an Employer ☒ or Consultant ?**14.b. Amount of payment.**

\$52

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Port of Oakland

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 530 Water Street

City Oakland

State California ZIP Code + 4 94607

7.a. Nature of Interest Transaction, or Income.

2/25/2004 lunch (\$40 est.)

7.b. Amount.

\$40

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Pacific Maritime Association

Trade Name, if any: PMA

P.O. Box, Bldg., Room No., if any

Street 550 California Street

City San Francisco

State California ZIP Code + 4 94104

7.a. Nature of Interest Transaction, or Income.

5/13/2004 dinner (\$90 est.)
Between 1/1/2004 and 12/31/2004 dinners and lunch
at least three times but not more than five (\$300)

7.b. Amount.

\$390

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name A P Moeller

Trade Name, if any: Maersk

P.O. Box, Bldg., Room No., if any Suite 700

Street 300 Montgomery Street

City San Francisco

State California ZIP Code + 4 94104-1909

7.a. Nature of Interest Transaction, or Income.

Between 1/1/2004 and 12/31/2004 at least one by not
more than three dinners (\$100 est.)

7.b. Amount.

\$100

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u>American Realtor Investors</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <u>Suite 300</u></p> <p>Street <u>1800 Valley View Lane</u></p> <p>City <u>Dallas</u></p> <p>State <u>Texas</u> ZIP Code + 4 <u>75234</u></p>	<p>14.a. Nature of payment:</p> <p><u>November 2004 dinner (\$80 est)</u></p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <u>\$80</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u>Barnett & Associates</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>3012 19th Street</u></p> <p>City <u>Metairie</u></p> <p>State <u>Louisiana</u> ZIP Code + 4 <u>70002</u></p>	<p>14.a. Nature of payment:</p> <p><u>November 2004 dinner (\$85 est)</u></p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <u>\$85</u></p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <u>Victory Capital Management</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street <u>127 Public Square</u></p> <p>City <u>Cleveland</u></p> <p>State <u>Ohio</u> ZIP Code + 4 <u>44114</u></p>	<p>14.a. Nature of payment:</p> <p><u>Between 1/1/2004 and 12/31/2004 dinner (\$80 est)</u></p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <u>\$80</u></p>

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Bradford & Marzec

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 4050

Street 333 South Hope Street

City Los Angeles

State California ZIP Code + 4 90071

14.a. Nature of payment.

December 2004 2 bottles of wine (\$44 est.)

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

\$44

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name RCM Capital Management

Trade Name, if any: RCM

P.O. Box, Bldg., Room No., if any

Street Four Embarcadero Center

City San Francisco

State California ZIP Code + 4 94111

14.a. Nature of payment.

Between 1/1/2001 and 12/31/2004 one dinner (\$75 est.)

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment

\$75

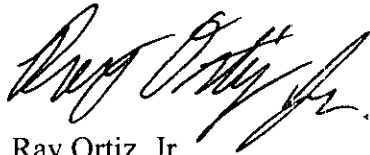
August 15, 2005

US Department of Labor
Employment Standards Administration
Office of Labor-Management Standards
200 Constitution Avenue, NW, Room N-5616
Washington DC 20210

Dear Sir,

Enclosed please find my LM-30 for calendar year 2004. I have tried my best to remember all of my contacts with the referenced entities that may fall within the LM-30 disclosure requirements during the 2004 calendar year. Given the passage of time, it is possible, if not likely, that I have not remembered every event or all of the relevant details of every event. All of my contacts with the referenced entities were routine and appropriate and occurred in the context of the ordinary course of my affairs on behalf of the Union.

Sincerely,

A handwritten signature in black ink, appearing to read "Ray Ortiz, Jr.", with a stylized flourish at the end.

Ray Ortiz, Jr